



Inspection Report on

Neuadd Drymmau Care Home Ltd

**Neuadd Drymmau Nursing Home
Drummau Road Skewen
Neath
SA10 6NR**

Date Inspection Completed

30/04/2024

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About Neuadd Drymmau Care Home Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Neuadd Drymmau Care Home Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	13.12.2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Neuadd Drymmau is a family run, homely and welcoming service that provides care to adults who require support with nursing or personal care needs. The service actively promotes independence and encourages people and their families to be involved in their care. There are up to date personal plans in place which reflect the person well. The service employs a skilled staff team who are appropriately trained to meet people's needs. The Responsible Individual (RI) and management team have a strong presence in the service and support staff through formal and informal discussion. Staff feel confident in their roles. People can do the things that matter to them which makes them happy. We saw staff contributing to the wellbeing of people through warm and sensitive interactions. Relatives spoken with provided positive feedback about the care and support provided.

There are plans in place to maintain the service and ensure there is ongoing refurbishment to the property for the benefit of people. The grounds are well maintained and provide a pleasant and peaceful area for people to spend time to relax or exercise. There is excellent governance by the RI which drives improvements and ensures people's needs are met.

Well-being

People have a voice and are treated with dignity and respect. During our inspection, we spoke to people who said they are supported to make decisions affecting their daily lives and are fully involved in their care. People told us *“I’m very happy, I didn’t want to come here, but it’s the best thing I’ve ever done, they’ve been absolutely wonderful”*. We saw very positive interactions between staff and people, and choices were consistently offered. This included what to eat, what to wear and how people wished to spend their time. A menu was clearly displayed on the dining room wall and people pointed this out to us. People said the standard and choice of meals are excellent. We were shown an activity board where people can put activity suggestions. People’s individual circumstances are considered, and the service actively seeks to accommodate these. Examples seen include unrestricted access to the outdoors, accommodating pets and unrestricted visiting times.

People’s physical and mental health, along with emotional wellbeing is promoted. The service employs a nursing team who are led by a highly skilled and experienced manager and clinical lead. There is a qualified nurse on duty day and night to attend to any nursing needs. Where needed, assistance is sought from other healthcare professionals such as GP’s, occupational therapists, and mental health practitioners. We saw records of healthcare appointments and during our visit, people were being supported by staff to attend appointments. The service employs a full-time physiotherapist who can assist with mobility needs and seek specialist equipment to promote people’s independence and overall wellbeing. Specialist equipment is available where needed and this is reviewed as appropriate. We spoke with a visiting professional who told us they hold Neuadd Drymmau in very high regard. They told us staff know people well and care is highly personalised to individual needs.

People live in an environment that promotes their well-being. Neuadd Drymmau is a large, spacious property set in extensive grounds in a rural location. People told us they liked the environment and *“Its important I see the wildlife around here which I can from my bedroom”*. People told us that they can rest and feel safe and comfortable in their surroundings. They said *“I’m glad to have come here. I have a lovely comfy bed and I have a great night sleep”*. The management team told us assessments are completed prior to people moving into the service to ensure that their needs can be effectively met. We saw records of these assessments in personal plans.

Care and Support

People are supported well with personal plans and risk assessments that reflect their needs. We saw a sample of personal plans which had up to date information and were reviewed regularly. Detailed risk assessments are available and correspond with these plans. People and their families told us they are involved in the review and updating of these plans. This was not fully captured in the documentation seen and was discussed with the manager of the service. They agreed to record all involvement from people and their families in future reviews. We saw care outcomes detailed in each personal plan. Care logs focussed on outcomes for people and were detailed and easy to read. We saw care staff provide support in a respectful and dignified manner and interactions were warm and considerate. People told us *“the staff treat me with dignity and respect and they show genuine caring, I can’t fault them”*.

People can do the things that matter to them and make them happy. We saw people carrying out activities that they enjoyed such as walking and accessing the local community. People told us *“there is always something going on and everyone is welcome to get involved”* and *“the outdoors is so important to me, and I am able to go outside whenever I like”*. Personal plans include detailed documentation about people’s preferences and hobbies. People’s participation in activities is not always captured in documentation and this was discussed with the manager who agreed to address it.

There are systems in place to safeguard people using the service. Care workers receive safeguarding training and those spoken with have good knowledge of their responsibilities and how to report concerns they may have about people they support. There is a safeguarding policy in place which is reviewed as required. Deprivation of Liberty Safeguards (DoLS) are in place and up to date for people who do not have the capacity to make decisions about their accommodation, care, and support.

There are safe systems for medicines management in place. We completed a medication audit and found that medication is stored appropriately in a designated locked room. We saw there are appropriate policies and procedures in place for medicines management which are reviewed annually. We saw a good history of medication room and fridge temperatures being checked daily and these were within the correct range. We spoke with the nurse clinical lead who demonstrated excellent knowledge of medicines management.

Environment

Care and support is provided in a location and environment that promotes achievement of personal outcomes. We found all areas of the service to be nicely decorated, clean and clutter free. There are communal spaces which are bright and welcoming where people can relax and socialise. We were told these are often used for activities and we saw people make good use of them. We saw a number of bedrooms which overall are nicely decorated, and each are personalised according to individual preferences. There is one bedroom that needs re-decoration which the RI assured us was planned to be completed soon. The service employs a full-time maintenance person and has ongoing plans for redecoration and refurbishment.

Adaptations and equipment are available where needed. We saw manual handling equipment is available and regularly maintained and serviced. Communal toilets & bathrooms have colour contrasting doors and toilets which helps to create a dementia friendly environment. There is work underway to install new panels on bedroom doors which are individualised to each person. These may include something to trigger memories, for example photographs or items of interest. To the rear of the property there is a large garden and a polytunnel where people can get involved in growing plants if they wish. People told us *"I enjoy the garden and polytunnel, I love being able to grow different plants and spend time outdoors"*.

The service provider has procedures in place to maintain the environment and mitigate risks to health and safety. The service has a keypad entry system in place and a visitors' book. This is to ensure the safety of people is maintained and to comply with fire regulations. We saw mandatory fire safety checks take place routinely and certificates for gas, fire detectors, fire extinguishers, electrical installation and electrical equipment are all up to date. A fire drill had taken place recently. Monthly water temperature checks are taken and documented. Personal emergency evacuation plans (PEEPs) are in place for people, and some were visible in their bedrooms. Laundry facilities are kept in a separate locked room and away from food preparation areas. The home has a current food hygiene rating of 5 (very good). We saw appropriate storage and control of substances hazardous to health (COSHH). These were kept in a designated locked area and risk assessed. We saw staff wearing appropriate personal protective equipment (PPE) and they told us there were sufficient supplies of these.

Leadership and Management

The provider has very strong governance arrangements in place to ensure the smooth operation of the service. The RI is present in the service daily and works extensively with people, their families, and staff to gather feedback about the service which informs any required improvements. This was seen in the quality-of-care reviews, which are consistently completed within regulatory timeframes and show a very high standard of oversight and governance. The RI is supported by a committed management team who work innovatively to drive improvements and ensure the smooth running of the service. We saw the management team complete monthly audits and promptly address any actions raised.

The service provider has strong oversight of financial arrangements and investment in the service. Refurbishment of the service is ongoing, and projects are either planned or in progress. On the day of inspection, staffing levels were appropriate and staff had time to attend to people's needs. Staff told us they feel there are sufficient staff on each shift to meet people's needs. The management team said staffing levels are kept under review as people's needs change. The service does not use agency staff and any shortfalls in staffing numbers are covered by the management team. They told us this ensures consistency in care delivery and continued financial viability.

People receive care and support from a committed and competent staff team who have appropriate knowledge and skills. We saw a training matrix which has ongoing training and development plans for staff. A wide range of mandatory training is offered along with service specific training such as dementia care and person-centred approaches. Nursing staff receive a range of clinical skills training such as catheterisation and PEG training. Staff spoken with told us they have excellent training. They said if they need further training in a specific area, they are comfortable asking the management team for this. Staff spoken with demonstrated a very strong understanding and knowledge of their roles and responsibilities.

The service has a highly committed staff team who feel supported in their roles. We sampled four staff files and saw robust recruitment and background checks are in place. Disclosure and Barring Service (DBS) checks are completed and renewed within the correct timeframes. We saw staff are registered with Social Care Wales (SCW) or working towards this. Nursing staff have up to date PIN numbers. Staff receive regular supervision and appraisal, and team meetings are frequently held. Minutes from team meetings show conversations are two way and there is an open and honest culture within the team. Staff spoken with told us *"If I've got any issues I go to the office, the door is always open"*.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
44	There are areas of damp within the home and extensive mould in the shaft beneath the flat roof. There are also areas that would benefit from redecoration due to minor damage and wear.	Achieved

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